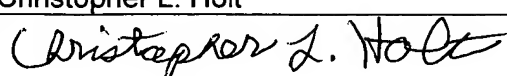


Please type a plus (+) sign in this box →

PTO/SB/05 (4/98)
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UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new non-provisional applications under 37 C.F.R. § 1.53(B))</i>		Attorney Docket No. M61.12-0548	
		First Inventor or Application Identifier Kaoru Okumura	
		Title EXPANDED SEARCH KEYWORDS	
		Express Mail Label No. EV178025365US	
APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>		Address To: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
1. <input checked="" type="checkbox"/> *Fee Transmittal Form e.g., PTO/SB17) (Submit an original and a duplicate for fee processing)		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer program (Appendix)	
2. <input type="checkbox"/> Applicant Claims small entity status			
3. <input checked="" type="checkbox"/> Specification [Total Sheets 21] (preferred arrangement set forth below) - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure		8. Nucleotide and/or Amino Acid Sequence Submission (If applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 Copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statement verifying identity of above copies	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. § 113) [Total Sheets 5]			
5. Oath or Declaration [Total Sheets 2] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§1.63(d)(2) and 1.33(b).		ACCOMPANYING APPLICATION PARTS	
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76			
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))			
10. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement (when there is an assignee) <input checked="" type="checkbox"/> Power of Attorney			
11. <input type="checkbox"/> English Translation Document (if applicable)			
12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO – 1449 <input type="checkbox"/> Copies of IDS Citations			
13. <input type="checkbox"/> Preliminary Amendment			
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)			
15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)			
16. <input type="checkbox"/> Nonpublication Request Under 35 USC 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent			
17. <input checked="" type="checkbox"/> Other: Checks in the amount of \$942 and \$40.			
18. If a CONTINUING APPLICATION , check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation –in part (CIP) of prior application No: _____ / _____ Prior application information: Examiner _____ Group/Art Unit: _____ FOR CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
17. CORRESPONDENCE			
<input type="checkbox"/> Customer Number or Bar Code Label or <input checked="" type="checkbox"/> Correspondence address below			
Name		Christopher L. Holt WESTMAN CHAMPLIN & KELLY	
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Name (Print/type)	Christopher L. Holt	Registration No. (Attorney/Agent)	45,844
Signature		Date	11/12/03

111203

18351 U.S. PTO

FEE TRANSMITTAL*Complete if Known*

Application No.

Filing Date

First Named Inventor

Kaoru Okumura

Title

EXPANDED SEARCH KEYWORDS

Group Art Unit

Examiner Name

Total Amount of Payment \$ 942

Atty. Docket Number

M61.12-0548

METHOD OF PAYMENT (Check One)**FEE CALCULATION (Continued)**

1. ☒ The Director is hereby authorized to charge any additional fee required under 37 C.F.R. § 1.16 and 1.17, including any petition fee, and credit any over payments to Deposit Account No. 23-1123.
Westman, Champlin & Kelly, P.A.

2. ☒ Check Enclosed

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity		Small Entity	
Fee	Code	Fee	Code
1001	770	2001	385
1002	340	2002	170
1004	770	2004	385
1005	160	2005	80

Code	Fee (\$)	Description
1001	770	<input checked="" type="checkbox"/> Utility Filing Fee
1002	340	<input type="checkbox"/> Design Filing Fee
1004	770	<input type="checkbox"/> Reissue Filing Fee
1005	160	<input type="checkbox"/> Prov. Filing Fee

Subtotal (1) \$ 770**2. EXTRA CLAIM FEES**

	Number Claims	Prior**	Extra	Fee from Below	Fee Paid
Total	19	20	0	18	0
Indep.	5	3	2	86	172

Multiple Dependent Claims

** Insert 3 and 20, or number previously paid if greater; Reissue see below

Large Entity		Small Entity		Description
Fee	Code	Fee	Code	
1202	18	2202	9	Claims in excess of 20
1201*	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple Dependent Claims
1204	86	2204	43	Reissue Independent Claims over Original Patent
1205	18	2205	9	Reissue claims in excess of 20 and over original patent

Subtotal (2) \$ 172**3. ADDITIONAL FEES**

Large Entity Fee	Small Entity Fee	Fee Description	Fee Paid
Code	(\$)	Code	(\$)
1051	130	2051	65
1052	50	2052	25
1053	130	1053	130
1812	2,520	1812	2,520
1251	110	2251	55
1252	420	2252	210
1253	950	2253	475
1254	1,480	2254	740
1255	2,010	2255	1,005
1402	330	2402	165
1403	290	2403	145
1814	110	2814	55
1452	110	2452	55
1453	1,330	2453	665
1501	1,330	2501	665
1502	480	2502	240
1460	130	1460	130
1807	50	1807	50
1806	180	1806	180
8021	40	8021	40

Other Fee (specify) _____

Subtotal (3) \$Signature Christopher L. Holt
(Christopher L. Holt)Reg. No. 45,844Date 11/12/03Deposit Account No. 23-1123